



# Commercial Electrical Permit Application

## City of Maple Grove

Fax 763-494-6417 Phone 763-494-6062  
12800 Arbor Lakes Pkwy, P.O. Box 1180  
Maple Grove, MN 55311

### For Office Use Only

Permit # \_\_\_\_\_

Permit Cost \_\_\_\_\_

Date Received \_\_\_\_\_

Job Site Address: \_\_\_\_\_ Suite/Unit #: \_\_\_\_\_

Tenant: \_\_\_\_\_

### Property Owner/General Contractor

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

### Contractor

Company Name: \_\_\_\_\_

EA License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

### Work Type

- |  |                                   |
|--|-----------------------------------|
| <input type="checkbox"/> New                           | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Remodel/Alter                 | <input type="checkbox"/> Repair   |
| <input type="checkbox"/> Interior Finish               | <input type="checkbox"/> Signs    |
| <input type="checkbox"/> Alarm Communicator/Fire Alarm | <input type="checkbox"/> Pool     |

### Required Inspections:

\_\_\_\_ Rough-In  
\_\_\_\_ Above Ceiling  
\_\_\_\_ Final

### Specific Description of Work to be Completed

Job Value \$ \_\_\_\_\_

Site Address \_\_\_\_\_

Commercial Electrical Inspection Fee Schedule/Worksheet			
Item Description		Fee	Total
A	Services – New, temporary, panel changes, panel additions, alteration, repair or upgrade	\$40	
B	Job value of \$2500 or less	\$75	
C	Job value over \$2500 to \$10,000	\$75 plus 2% of value over \$2500	
	Job value greater than \$10,000	\$225 plus 1.5% of job value over \$10,000	
F	Generator	\$80	
G	Separate bonding inspection	\$40/inspection	
H	State Surcharge – to be included in each permit	.0005 x job value	
Permit Fee Total			\$

Permit becomes void if the work does not begin within 180 days or is suspended at any time for over 180 days. Permits issued and inspections made by the City are a public service and do not constitute any representation, guarantee or warranty, either implied or expressed, to any person as to the condition of the building or conformance to applicable construction codes. The undersigned acknowledges that this application had been read and that the above is correct and agrees to comply with all the ordinances and laws of the City of Maple Grove. **Periodic and/or final inspection of this work is required by the Minnesota State Building Code. It is the responsibility of the applicant to call the Maple Grove Inspection Division at 763-494-6060 to schedule an Inspection.**

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**WE ACCEPT MASTERCARD, VISA, DISCOVER, and AMEX  
FOR PERMIT FEES TOTALING LESS THAN \$1000**

**This information will be destroyed after the permit has been processed.**

Under Minnesota law the information provided on this application is considered public and is available to anyone, except for the following:

The information regarding your credit card is private and will be provided only to you and to those people necessary to process your payment. This includes city employees who process your payment and employees of applicable financial institutions. You are not required to provide your credit card information if you want to pay by another method. However, if you choose to pay by credit card you must provide your credit card information to pay the appropriate fee. Otherwise, your application will not be processed.

<b>To Pay By Credit Card</b>  <b>MasterCard Visa, Discover, or AMEX</b>	<b>Name as it appears on card:</b> _____
	<b>Type of Credit Card:</b> <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> AMEX
	<b>Expiration Date:</b> ____/____/____
	<b>Account Number:</b> _____
	<b>CVC #</b> _____
	<b>Signature:</b> _____ <b>Date:</b> _____
	<b>Billing Address:</b> _____
	<b>City:</b> _____ <b>State:</b> _____ <b>Zip Code</b> _____

***Notice: Faxed applications will not be processed within 24 hours of receipt and must have credit card payment info completed.***